

AMENDED IN SENATE MAY 27, 2014
AMENDED IN SENATE MARCH 27, 2014
AMENDED IN SENATE MARCH 4, 2014

SENATE BILL

No. 911

Introduced by Senator Block

(~~Coauthor: Senator Correa~~)

(*Coauthors: Senators Correa and Leno*)

(Coauthors: Assembly Members Ammiano, Brown, Chávez, Skinner,
Ting, Wieckowski, and Yamada)

January 23, 2014

An act to amend, *repeal, and add* Sections 1569.23, 1569.62, 1569.625, 1569.626, and 1569.69 of, and to add Sections 1569.371, 1569.39, and 1569.696 to, the Health and Safety Code, relating to residential care facilities for the elderly.

LEGISLATIVE COUNSEL'S DIGEST

SB 911, as amended, Block. Residential care facilities for the elderly.

(1) Existing law, the California Residential Care Facilities for the Elderly Act, provides for the licensure and regulation of residential care facilities for the elderly by the State Department of Social Services. A person who violates the act is guilty of a misdemeanor and subject to civil penalty and suspension or revocation of license.

Existing law requires an applicant for a license to complete, at a minimum, a 40-hour certification program approved by the department that includes instruction in a uniform code of knowledge, and to pass a written test.

This bill would change the minimum hours of classroom instruction to 100 hours, of which 80 hours are classroom instruction, and would

add additional topics to the uniform code of knowledge, including, but not limited to, the adverse effects of psychotropic drugs for use in controlling the behavior of persons with dementia. The bill would also require the department to annually review the test and update it as necessary to reflect changes in the law and regulations.

This bill would require that no licensee, or officer or employee of the licensee, shall discriminate or retaliate against any person receiving the services of the licensee's residential care facility for the elderly, or against any employee of the licensee's facility, on the basis, or for the reason that, the person, employee, or any other person dialed or called 911.

This bill would require a residential care facility for the elderly that accepts or retains residents with prohibited health conditions, as defined by the department, to ensure that residents receive home health or hospice services sufficient in scope and hours by appropriately skilled professionals, acting within their scope of practice, to ensure that residents receive medical care as prescribed by the resident's physician and contained in the resident's service plan. This bill would define an "appropriately skilled professional" as an individual who has training and is licensed to perform the necessary medical procedures prescribed by a physician, which includes, but is not limited to, a registered nurse, licensed vocational nurse, physical therapist, occupational therapist, or respiratory therapist.

(2) Existing law requires the Director of Social Services to ensure that licensees, administrators, and staffs of residential care facilities for the elderly have appropriate training to provide the care and services for which a license or certificate is issued. The department is required to develop a uniform code of knowledge for the continuing education of administrators of residential care facilities for the elderly.

This bill would also require the department to develop a uniform code of knowledge jointly with the California Department of Aging for the initial certification of administrators, and add additional topics to the uniform code of knowledge, including, but not limited to, applicable laws and regulations and residents' rights.

(3) Existing law requires the department to adopt regulations to require staff members of residential care facilities for the elderly who assist residents with personal activities of daily living to receive 10 hours of training within the first 4 weeks of employment, and 4 hours of training annually thereafter on topics, including, but not limited to, policies and procedures regarding medications.

This bill would increase that training to 40 hours of training within the first 4 weeks of employment, 20 hours of training annually thereafter, and would also require that at least 24 hours of training be completed prior to providing direct care to residents. This bill would exempt certified nurse assistants with valid certification from those requirements, provided that certified nurse assistants receive 8 hours of training, prior to providing direct care to residents, on resident characteristics, plans of care, resident records, and facility practices and procedures. ~~This bill would also authorize the department to develop a certification training program with a standardized test for specified staff.~~

(4) Existing law requires all direct care staff of a residential care facility for the elderly, which advertises or promotes special care, programming, or environment for persons with dementia, receive 6 hours of resident care orientation within the first 4 weeks of employment and 8 hours of in-service training per year.

This bill would increase that training to 15 hours of resident care orientation, prior to providing direct care to residents, and 12 hours of in-service training per year on the subject of providing care and supervision to residents with dementia.

(5) Existing law requires that employees who assist residents with the self-administration of medications at a licensed residential care facility for the elderly, which provides care for 16 or more persons, complete 16 hours of initial training, consisting of 8 hours of hands-on shadowing training and 8 hours of other training or instruction, to be completed within the first 2 weeks of employment. If that facility provides care for 15 or fewer persons, employees are required to complete 6 hours of initial training, consisting of 2 hours of hands-on shadowing training and 4 hours of other training or instruction, to be completed within the first 2 weeks of employment.

This bill would require employees at a licensed residential care facility for the elderly that provides care for 16 or more persons, to complete 32 hours of initial training, consisting of 12 hours of hands-on shadowing training and 20 hours of other training or instruction, to be completed within the first 4 weeks of employment. For facilities providing care for 15 or fewer persons, this bill would increase those training requirements to 16 hours of initial training, consisting of 8 hours of hands-on shadowing training, and 8 hours of other training.

This bill would require all direct care staff of residential care facilities for the elderly that serve residents with postural supports, or restricted

health conditions or health services, or who receive hospice care services, as described in specified regulations, in addition to other training requirements, receive 15 hours of training on the care, supervision, and special needs of those residents, prior to providing direct care to residents. This bill also would require 12 hours of in-service training per year on the subject of serving those residents.

(6) Because a violation of any of the above provisions would be a misdemeanor, this bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

(7) *This bill would make its provisions operative on January 1, 2016.*

Vote: majority. Appropriation: no. Fiscal committee: yes.

State-mandated local program: yes.

The people of the State of California do enact as follows:

- 1 ~~SECTION 1. Section 1569.23 of the Health and Safety Code~~
- 2 ~~is amended to read:~~
- 3 ~~1569.23. (a) As a requirement for licensure, the applicant shall~~
- 4 ~~demonstrate that he or she has successfully completed a~~
- 5 ~~certification program approved by the department.~~
- 6 ~~(b) The certification program shall be for a minimum of 100~~
- 7 ~~hours, of which 80 hours are classroom instruction, and include a~~
- 8 ~~uniform core of knowledge which shall include all of the following:~~
- 9 ~~(1) Law, regulations, policies, and procedural standards that~~
- 10 ~~impact the operations of residential care facilities for the elderly.~~
- 11 ~~(2) Business operations.~~
- 12 ~~(3) Management and supervision of staff.~~
- 13 ~~(4) Psychosocial need of the elderly residents.~~
- 14 ~~(5) Physical needs for elderly residents.~~
- 15 ~~(6) Community and support services.~~
- 16 ~~(7) Use, misuse, and interaction of drugs commonly used by~~
- 17 ~~the elderly, and the adverse effects of psychotropic drugs for use~~
- 18 ~~in controlling the behavior of persons with dementia.~~
- 19 ~~(8) Nonpharmacologic, person-centered approaches to dementia~~
- 20 ~~care.~~
- 21 ~~(9) Resident admission, retention, and assessment procedures.~~

1 ~~(10) Residents' rights, and the importance of initial and ongoing~~
2 ~~training for all staff to ensure residents' rights are fully respected~~
3 ~~and implemented.~~

4 ~~(e) Successful completion of the certification program shall be~~
5 ~~demonstrated by passing a written test and submitting a fee of one~~
6 ~~hundred dollars (\$100) to the department for the issuance of a~~
7 ~~certificate of completion.~~

8 ~~(d) The department shall establish by regulation the program~~
9 ~~content, the testing instrument, process for approving certification~~
10 ~~programs, and criteria to be used for authorizing individuals or~~
11 ~~organizations to conduct certification programs. These regulations~~
12 ~~shall be developed with the participation of provider organizations~~
13 ~~and other stakeholder groups. The department shall review the test~~
14 ~~annually and update it as necessary to reflect changes in law and~~
15 ~~regulations.~~

16 ~~(e) This section shall apply to all applications for licensure~~
17 ~~unless the applicant provides evidence that he or she has a current~~
18 ~~license for another residential care facility for the elderly which~~
19 ~~was initially licensed prior to July 1, 1989, or has successfully~~
20 ~~completed an approved certification program within the prior five~~
21 ~~years.~~

22 ~~(f) If the applicant is a firm, partnership, association, or~~
23 ~~corporation, the chief executive officer, or other person serving in~~
24 ~~a like capacity, or the designated administrator of the facility shall~~
25 ~~provide evidence of successfully completing an approved~~
26 ~~certification program.~~

27 ~~SECTION 1. Section 1569.23 of the Health and Safety Code~~
28 ~~is amended to read:~~

29 1569.23. (a) As a requirement for licensure, the applicant shall
30 demonstrate that he or she has successfully completed a
31 certification program approved by the department.

32 (b) The certification program shall be for a minimum of 40
33 hours of classroom instruction and include a uniform core of
34 knowledge which shall include all of the following:

35 (1) Law, regulations, policies, and procedural standards that
36 impact the operations of residential care facilities for the elderly.

37 (2) Business operations.

38 (3) Management and supervision of staff.

39 (4) Psychosocial need of the elderly residents.

40 (5) Physical needs for elderly residents.

1 (6) Community and support services.

2 (7) Use, misuse, and interaction of drugs commonly used by
3 the elderly.

4 (8) Resident admission, retention, and assessment procedures.

5 (c) Successful completion of the certification program shall be
6 demonstrated by passing a written test and submitting a fee of one
7 hundred dollars (\$100) to the department for the issuance of a
8 certificate of completion.

9 (d) The department shall establish by regulation the program
10 content, the testing instrument, process for approving certification
11 programs, and criteria to be used for authorizing individuals or
12 organizations to conduct certification programs. These regulations
13 shall be developed with the participation of provider organizations.

14 (e) This section shall apply to all applications for licensure
15 unless the applicant provides evidence that he or she has a current
16 license for another residential care facility for the elderly which
17 was initially licensed prior to July 1, 1989, or has successfully
18 completed an approved certification program within the prior five
19 years.

20 (f) If the applicant is a firm, partnership, association, or
21 corporation, the chief executive officer, or other person serving in
22 a like capacity, or the designated administrator of the facility shall
23 provide evidence of successfully completing an approved
24 certification program.

25 (g) *This section shall remain in effect only until January 1, 2016,*
26 *and as of that date is repealed, unless a later enacted statute, that*
27 *is enacted before January 1, 2016, deletes or extends that date.*

28 SEC. 2. *Section 1569.23 is added to the Health and Safety*
29 *Code, to read:*

30 1569.23. (a) *As a requirement for licensure, the applicant*
31 *shall demonstrate that he or she has successfully completed a*
32 *certification program approved by the department.*

33 (b) *The certification program shall be for a minimum of 100*
34 *hours, of which 80 hours are classroom instruction, and include*
35 *a uniform core of knowledge which shall include all of the*
36 *following:*

37 (1) *Law, regulations, policies, and procedural standards that*
38 *impact the operations of residential care facilities for the elderly.*

39 (2) *Business operations.*

40 (3) *Management and supervision of staff.*

1 (4) *Psychosocial needs of the elderly residents.*

2 (5) *Physical needs of the elderly residents.*

3 (6) *Community and support services.*

4 (7) *Use, misuse, and interaction of drugs commonly used by the*
5 *elderly, and the adverse effects of psychotropic drugs for use in*
6 *controlling the behavior of persons with dementia.*

7 (8) *Nonpharmacologic, person-centered approaches to dementia*
8 *care.*

9 (9) *Resident admission, retention, and assessment procedures.*

10 (10) *Residents' rights, and the importance of initial and ongoing*
11 *training for all staff to ensure residents' rights are fully respected*
12 *and implemented.*

13 (c) *Successful completion of the certification program shall be*
14 *demonstrated by passing a written test and submitting a fee of one*
15 *hundred dollars (\$100) to the department for the issuance of a*
16 *certificate of completion.*

17 (d) *The department shall establish by regulation the program*
18 *content, the testing instrument, process for approving certification*
19 *programs, and criteria to be used for authorizing individuals or*
20 *organizations to conduct certification programs. These regulations*
21 *shall be developed with the participation of provider organizations*
22 *and other stakeholder groups. The department shall review the*
23 *test annually and update it as necessary to reflect changes in law*
24 *and regulations.*

25 (e) *This section shall apply to all applications for licensure*
26 *unless the applicant provides evidence that he or she has a current*
27 *license for another residential care facility for the elderly which*
28 *was initially licensed prior to July 1, 1989, or has successfully*
29 *completed an approved certification program within the prior five*
30 *years.*

31 (f) *If the applicant is a firm, partnership, association, or*
32 *corporation, the chief executive officer, or other person serving*
33 *in a like capacity, or the designated administrator of the facility*
34 *shall provide evidence of successfully completing an approved*
35 *certification program.*

36 (g) *This section shall become operative on January 1, 2016.*

37 ~~SEC. 2.~~

38 SEC. 3. Section 1569.371 is added to the Health and Safety
39 Code, to read:

1 1569.371. (a) No licensee, or officer or employee of the
2 licensee, shall discriminate or retaliate in any manner against any
3 person receiving the services of the licensee's residential care
4 facility for the elderly, or against any employee of the licensee's
5 facility, on the basis, or for the reason that, the person, employee,
6 or any other person dialed or called 911.

7 (b) A violation of this section is subject to civil penalty pursuant
8 to Section 1569.49.

9 (c) *This section shall become operative on January 1, 2016.*

10 ~~SEC. 3.~~

11 *SEC. 4.* Section 1569.39 is added to the Health and Safety
12 Code, to read:

13 1569.39. (a) A residential care facility for the elderly that
14 accepts or retains residents with prohibited health conditions, as
15 defined by the department, in Section 87615 of Title 22 of the
16 California Code of Regulations, shall ensure that residents receive
17 home health or hospice services sufficient in scope and hours to
18 ensure that residents receive medical care as prescribed by the
19 resident's physician and contained in the resident's service plan.

20 (b) A residential care facility for the elderly that accepts or
21 retains residents with restricted health conditions, as defined by
22 the department, shall ensure that residents receive medical care as
23 prescribed by the resident's physician and contained in the
24 resident's service plan by appropriately skilled professionals acting
25 within their scope of practice.

26 (c) An "appropriately skilled professional" means, for purposes
27 of this section, an individual who has training and is licensed to
28 perform the necessary medical procedures prescribed by a
29 physician. This includes, but is not limited to, a registered nurse,
30 licensed vocational nurse, physical therapist, occupational therapist,
31 or respiratory therapist. These professionals may include, but are
32 not limited to, those persons employed by a home health agency,
33 the resident, or a facility, and who are currently licensed in this
34 state.

35 (d) Failure to meet or arrange to meet the needs of those
36 residents who require ~~specialized health~~ *health-related* services;
37 *as specified in the resident's written record of care, defined*
38 *pursuant to Section 1569.80*, or failure to notify the physician of
39 a resident's illness or injury that poses a danger of death or serious

1 bodily harm is a licensing violation and subject to civil penalty
2 pursuant to Section 1569.49.

3 *(e) This section shall become operative on January 1, 2016.*

4 ~~SEC. 4. Section 1569.62 of the Health and Safety Code is~~
5 ~~amended to read:~~

6 ~~1569.62. (a) The director shall ensure that licensees,~~
7 ~~administrators, and staffs of residential care facilities for the elderly~~
8 ~~have appropriate training to provide the care and services for which~~
9 ~~a license or certificate is issued.~~

10 ~~(b) The department shall develop jointly with the California~~
11 ~~Department of Aging requirements for a uniform core of knowledge~~
12 ~~for the required initial certification and continuing education for~~
13 ~~administrators, and their designated substitutes, and for~~
14 ~~recertification of administrators of residential care facilities for~~
15 ~~the elderly. This knowledge base shall include, as a minimum,~~
16 ~~basic understanding of the psychosocial and physical care needs~~
17 ~~of elderly persons, applicable laws and regulations, residents'~~
18 ~~rights, and administration. This training shall be developed in~~
19 ~~consultation with individuals or organizations with specific~~
20 ~~expertise in residential care facilities for the elderly or assisted~~
21 ~~living services, or by an outside source with expertise in residential~~
22 ~~care facilities for the elderly or assisted living services.~~

23 ~~(1) The initial certification training for administrators shall~~
24 ~~consist of at least 100 hours.~~

25 ~~(2) The continuing education requirement for administrators is~~
26 ~~at least 60 hours of training during each two-year certification~~
27 ~~period.~~

28 ~~(c) (1) The department shall develop a uniform resident~~
29 ~~assessment tool to be used by all residential care facilities for the~~
30 ~~elderly. The assessment tool shall, in lay terms, help to identify~~
31 ~~resident needs for service and assistance with activities of daily~~
32 ~~living.~~

33 ~~(2) The departments shall develop a mandatory training program~~
34 ~~on the utilization of the assessment tool to be given to~~
35 ~~administrators and their designated substitutes.~~

36 ~~SEC. 5. Section 1569.625 of the Health and Safety Code is~~
37 ~~amended to read:~~

38 ~~1569.625. (a) The Legislature finds that the quality of services~~
39 ~~provided to residents of residential care facilities for the elderly is~~
40 ~~dependent upon the training and skills of staff.~~

~~(b) The current training requirements for staff of residential care facilities for the elderly are insufficient to meet the range of care needs of the residents of those facilities. It is the intent of the Legislature in enacting this section to ensure that direct care staff have the knowledge and proficiency to carry out the tasks of their jobs.~~

~~(c) The department shall adopt regulations to require staff members of residential care facilities for the elderly who assist residents with personal activities of daily living to receive appropriate training. This training shall consist of 40 hours of training within the first four weeks of employment, at least 24 hours of which shall be completed prior to providing direct care to residents, and 20 hours annually thereafter. This training shall be administered on the job, or in a classroom setting, or any combination of the two. The department shall establish the subject matter required for this training. This training shall be developed in consultation with individuals or organizations with specific expertise in residential care facilities for the elderly or assisted living services, or by an outside source with expertise in residential care facilities for the elderly or assisted living services, as defined in Section 1771.~~

~~(d) The training shall include, but not be limited to, the following:~~

- ~~(1) Physical limitations and needs of the elderly.~~
- ~~(2) Importance and techniques for personal care services.~~
- ~~(3) Residents' rights.~~
- ~~(4) Policies and procedures regarding medications.~~
- ~~(5) Use, misuse, and interaction of drugs commonly used by the elderly, and the adverse effects of psychotropic drugs for use in controlling the behavior of persons with dementia.~~
- ~~(6) The special needs of persons with Alzheimer's disease and dementia, including nonpharmacologic person-centered approaches to dementia care.~~
- ~~(7) Psychosocial needs of the elderly.~~
- ~~(8) This subdivision shall not apply to certified nurse assistants, certified pursuant to Section 1337.2, except that certified nurse assistants with valid certification shall receive eight hours of training prior to providing direct care to residents, on resident characteristics, resident records, and facility practices and procedures.~~

1 ~~(e) The department may develop a certification training program~~
2 ~~with a standardized test for staff pursuant to this section and~~
3 ~~Sections 1569.626, 1569.69, and 1569.696.~~

4 ~~SEC. 6. Section 1569.626 of the Health and Safety Code is~~
5 ~~amended to read:~~

6 ~~1569.626. All residential care facilities for the elderly that~~
7 ~~advertise or promote special care, special programming, or a special~~
8 ~~environment for persons with dementia, in addition to complying~~
9 ~~with the training requirements described in Section 1569.625, shall~~
10 ~~meet the following training requirements for all direct care staff:~~

11 ~~(a) Fifteen hours of resident care orientation prior to providing~~
12 ~~direct care to residents. All 15 hours shall be devoted to the care~~
13 ~~of persons with dementia. The facility may utilize various methods~~
14 ~~of instruction including, but not limited to, preceptorship,~~
15 ~~mentoring, and other forms of observation and demonstration. The~~
16 ~~orientation time shall be exclusive of any administrative instruction.~~

17 ~~(b) Twelve hours of in-service training per year on the subject~~
18 ~~of providing care and supervision to residents with dementia. This~~
19 ~~training shall be developed in consultation with individuals or~~
20 ~~organizations with specific expertise in dementia care or by an~~
21 ~~outside source with expertise in dementia care. In formulating and~~
22 ~~providing this training, reference may be made to written materials~~
23 ~~and literature on dementia and the care and treatment of persons~~
24 ~~with dementia. This training requirement may be provided at the~~
25 ~~facility or offsite and may include a combination of observation~~
26 ~~and practical application.~~

27 ~~SEC. 7. Section 1569.69 of the Health and Safety Code is~~
28 ~~amended to read:~~

29 ~~1569.69. (a) Each residential care facility for the elderly~~
30 ~~licensed under this chapter shall ensure that each employee of the~~
31 ~~facility who assists residents with the self-administration of~~
32 ~~medications meets the following training requirements:~~

33 ~~(1) In facilities licensed to provide care for 16 or more persons,~~
34 ~~the employee shall complete 32 hours of initial training. This~~
35 ~~training shall consist of 12 hours of hands-on shadowing training,~~
36 ~~which shall be completed prior to assisting with the~~
37 ~~self-administration of medications, and 20 hours of other training~~
38 ~~or instruction, as described in subdivision (f), which shall be~~
39 ~~completed within the first four weeks of employment.~~

~~(2) In facilities licensed to provide care for 15 or fewer persons, the employee shall complete 16 hours of initial training. This training shall consist of eight hours of hands-on shadowing training, which shall be completed prior to assisting with the self-administration of medications, and eight hours of other training or instruction, as described in subdivision (f), which shall be completed within the first two weeks of employment.~~

~~(3) An employee shall be required to complete the training requirements for hands-on shadowing training described in this subdivision prior to assisting any resident in the self-administration of medications. The training and instruction described in this subdivision shall be completed, in their entirety, within the first two weeks of employment.~~

~~(4) The training shall cover all of the following areas:~~

~~(A) The role, responsibilities, and limitations of staff who assist residents with the self-administration of medication, including tasks limited to licensed medical professionals.~~

~~(B) An explanation of the terminology specific to medication assistance.~~

~~(C) An explanation of the different types of medication orders: prescription, over-the-counter, controlled, and other medications.~~

~~(D) An explanation of the basic rules and precautions of medication assistance.~~

~~(E) Information on medication forms and routes for medication taken by residents.~~

~~(F) A description of procedures for providing assistance with the self-administration of medications in and out of the facility, and information on the medication documentation system used in the facility.~~

~~(G) An explanation of guidelines for the proper storage, security, and documentation of centrally stored medications.~~

~~(H) A description of the processes used for medication ordering, refills, and the receipt of medications from the pharmacy.~~

~~(I) An explanation of medication side effects, adverse reactions, errors, the adverse effects of psychotropic drugs for use in controlling the behavior of persons with dementia, and the increased risk of death when elderly residents with dementia are given antipsychotic medications.~~

~~(5) To complete the training requirements set forth in this subdivision, each employee shall pass an examination that tests~~

1 the employee's comprehension of, and competency in, the subjects
2 listed in paragraph (4):

3 ~~(6) Residential care facilities for the elderly shall encourage~~
4 ~~pharmacists and licensed medical professionals to use plain English~~
5 ~~when preparing labels on medications supplied to residents. As~~
6 ~~used in this section, "plain English" means that no abbreviations,~~
7 ~~symbols, or Latin medical terms shall be used in the instructions~~
8 ~~for the self-administration of medication.~~

9 ~~(7) The training requirements of this section are not intended~~
10 ~~to replace or supplant those required of all staff members who~~
11 ~~assist residents with personal activities of daily living as set forth~~
12 ~~in Sections 1569.625 and 1569.696.~~

13 ~~(8) The training requirements of this section shall be repeated~~
14 ~~if either of the following occurs:~~

15 ~~(A) An employee returns to work for the same licensee after a~~
16 ~~break of service of more than 180 consecutive calendar days.~~

17 ~~(B) An employee goes to work for another licensee in a facility~~
18 ~~in which he or she assists residents with the self-administration of~~
19 ~~medication.~~

20 ~~(b) Each employee who received training and passed the~~
21 ~~examination required in paragraph (5) of subdivision (a), and who~~
22 ~~continues to assist with the self-administration of medicines, shall~~
23 ~~also complete eight hours of in-service training on~~
24 ~~medication-related issues in each succeeding 12-month period.~~

25 ~~(c) The requirements set forth in subdivisions (a) and (b) do not~~
26 ~~apply to persons who are licensed medical professionals.~~

27 ~~(d) Each residential care facility for the elderly that provides~~
28 ~~employee training under this section shall use the training material~~
29 ~~and the accompanying examination that are developed by, or in~~
30 ~~consultation with, a licensed nurse, pharmacist, or physician. The~~
31 ~~licensed residential care facility for the elderly shall maintain the~~
32 ~~following documentation for each medical consultant used to~~
33 ~~develop the training:~~

34 ~~(1) The name, address, and telephone number of the consultant.~~

35 ~~(2) The date when consultation was provided.~~

36 ~~(3) The consultant's organization affiliation, if any, and any~~
37 ~~educational and professional qualifications specific to medication~~
38 ~~management.~~

39 ~~(4) The training topics for which consultation was provided.~~

~~(e) Each person who provides employee training under this section shall meet the following education and experience requirements:~~

~~(1) A minimum of five hours of initial, or certified continuing, education or three semester units, or the equivalent, from an accredited educational institution, on topics relevant to medication management.~~

~~(2) The person shall meet any of the following practical experience or licensure requirements:~~

~~(A) Two years of full-time experience, within the last four years, as a consultant with expertise in medication management in areas covered by the training described in subdivision (a).~~

~~(B) Two years of full-time experience, or the equivalent, within the last four years, as an administrator for a residential care facility for the elderly, during which time the individual has acted in substantial compliance with applicable regulations.~~

~~(C) Two years of full-time experience, or the equivalent, within the last four years, as a direct care provider assisting with the self-administration of medications for a residential care facility for the elderly, during which time the individual has acted in substantial compliance with applicable regulations.~~

~~(D) Possession of a license as a medical professional.~~

~~(3) The licensed residential care facility for the elderly shall maintain the following documentation on each person who provides employee training under this section:~~

~~(A) The person's name, address, and telephone number.~~

~~(B) Information on the topics or subject matter covered in the training.~~

~~(C) The time, dates, and hours of training provided.~~

~~(f) Other training or instruction, as required in paragraphs (1) and (2) of subdivision (a), may be provided offsite, and may use various methods of instruction, including, but not limited to, all of the following:~~

~~(1) Lectures by presenters who are knowledgeable about medication management.~~

~~(2) Video recorded instruction, interactive material, online training, and books.~~

~~(3) Other written or visual materials approved by organizations or individuals with expertise in medication management.~~

1 ~~(g) Residential care facilities for the elderly licensed to provide~~
2 ~~care for 16 or more persons shall maintain documentation that~~
3 ~~demonstrates that a consultant pharmacist or nurse has reviewed~~
4 ~~the facility's medication management program and procedures at~~
5 ~~least twice a year.~~

6 ~~(h) Nothing in this section authorizes unlicensed personnel to~~
7 ~~directly administer medications.~~

8 *SEC. 5. Section 1569.62 of the Health and Safety Code is*
9 *amended to read:*

10 1569.62. (a) The director shall ensure that licensees,
11 administrators, and staffs of residential care facilities for the elderly
12 have appropriate training to provide the care and services for which
13 a license or certificate is issued.

14 (b) The department shall develop jointly with the Department
15 of Aging, with input from provider organizations, requirements
16 for a uniform core of knowledge within the required 20 hours of
17 continuing education for administrators, and their designated
18 substitutes, and for recertification of administrators of residential
19 care facilities for the elderly. This knowledge base shall include,
20 as a minimum, basic understanding of the psychosocial and
21 physical care needs of elderly persons and administration. The
22 department shall develop jointly with the Department of Aging,
23 with input from provider organizations, a uniform resident
24 assessment tool to be used by all residential care facilities for the
25 elderly. The assessment tool shall, in lay terms, help to identify
26 resident needs for service and assistance with activities of daily
27 living.

28 The departments shall develop a mandatory training program
29 on the utilization of the assessment tool to be given to
30 administrators and their designated substitutes.

31 *(c) This section shall remain in effect only until January 1, 2016,*
32 *and as of that date is repealed, unless a later enacted statute, that*
33 *is enacted before January 1, 2016, deletes or extends that date.*

34 *SEC. 6. Section 1569.62 is added to the Health and Safety*
35 *Code, to read:*

36 1569.62. (a) The director shall ensure that licensees,
37 administrators, and staff of residential care facilities for the elderly
38 have appropriate training to provide the care and services for
39 which a license or certificate is issued.

(b) The department shall develop jointly with the California Department of Aging requirements for a uniform core of knowledge for the required initial certification and continuing education for administrators, and their designated substitutes, and for recertification of administrators of residential care facilities for the elderly. This knowledge base shall include, as a minimum, basic understanding of the psychosocial and physical care needs of elderly persons, applicable laws and regulations, residents' rights, and administration. This training shall be developed in consultation with individuals or organizations with specific expertise in residential care facilities for the elderly or assisted living services, or by an outside source with expertise in residential care facilities for the elderly or assisted living services.

(1) The initial certification training for administrators shall consist of at least 100 hours.

(2) The continuing education requirement for administrators is at least 60 hours of training during each two-year certification period.

(c) (1) The department shall develop a uniform resident assessment tool to be used by all residential care facilities for the elderly. The assessment tool shall, in lay terms, help to identify resident needs for service and assistance with activities of daily living.

(2) The departments shall develop a mandatory training program on the utilization of the assessment tool to be given to administrators and their designated substitutes.

(d) This section shall become operative on January 1, 2016.

SEC. 7. Section 1569.625 of the Health and Safety Code is amended to read:

1569.625. (a) The Legislature finds that the quality of services provided to residents of residential care facilities for the elderly is dependent upon the training and skills of staff. It is the intent of the Legislature in enacting this section to ensure that direct-care staff have the knowledge and proficiency to carry out the tasks of their jobs.

(b) The department shall adopt regulations to require staff members of residential care facilities for the elderly who assist residents with personal activities of daily living to receive appropriate training. This training shall consist of 10 hours of training within the first four weeks of employment and four hours

1 annually thereafter. This training shall be administered on the job,
2 or in a classroom setting, or any combination of the two. The
3 department shall establish, in consultation with provider
4 organizations, the subject matter required for this training.

5 (c) The training shall include, but not be limited to, the
6 following:

- 7 (1) Physical limitations and needs of the elderly.
- 8 (2) Importance and techniques for personal care services.
- 9 (3) Residents' rights.
- 10 (4) Policies and procedures regarding medications.
- 11 (5) Psychosocial needs of the elderly.

12 (d) *This section shall remain in effect only until January 1, 2016,*
13 *and as of that date is repealed, unless a later enacted statute, that*
14 *is enacted before January 1, 2016, deletes or extends that date.*

15 SEC. 8. *Section 1569.625 is added to the Health and Safety*
16 *Code, to read:*

17 1569.625. (a) *The Legislature finds that the quality of services*
18 *provided to residents of residential care facilities for the elderly*
19 *is dependent upon the training and skills of staff.*

20 (b) *The current training requirements for staff of residential*
21 *care facilities for the elderly are insufficient to meet the range of*
22 *care needs of the residents of those facilities. It is the intent of the*
23 *Legislature in enacting this section to ensure that direct care staff*
24 *have the knowledge and proficiency to carry out the tasks of their*
25 *jobs.*

26 (c) *The department shall adopt regulations to require staff*
27 *members of residential care facilities for the elderly who assist*
28 *residents with personal activities of daily living to receive*
29 *appropriate training. This training shall consist of 40 hours of*
30 *training within the first four weeks of employment, at least 24*
31 *hours of which shall be completed prior to providing direct care*
32 *to residents, and 20 hours annually thereafter. This training shall*
33 *be administered on the job, or in a classroom setting, or any*
34 *combination of the two. The department shall establish the subject*
35 *matter required for this training. This training shall be developed*
36 *in consultation with individuals or organizations with specific*
37 *expertise in residential care facilities for the elderly or assisted*
38 *living services, or by an outside source with expertise in residential*
39 *care facilities for the elderly or assisted living services, as defined*
40 *in Section 1771.*

1 (d) The training shall include, but not be limited to, the
2 following:

3 (1) Physical limitations and needs of the elderly.

4 (2) Importance and techniques for personal care services.

5 (3) Residents' rights.

6 (4) Policies and procedures regarding medications.

7 (5) Use, misuse, and interaction of drugs commonly used by the
8 elderly, and the adverse effects of psychotropic drugs for use in
9 controlling the behavior of persons with dementia.

10 (6) The special needs of persons with Alzheimer's disease and
11 dementia, including nonpharmacologic person-centered
12 approaches to dementia care.

13 (7) Psychosocial needs of the elderly.

14 (8) This subdivision shall not apply to certified nurse assistants,
15 certified pursuant to Section 1337.2, except that certified nurse
16 assistants with valid certification shall receive eight hours of
17 training prior to providing direct care to residents, on resident
18 characteristics, resident records, and facility practices and
19 procedures.

20 (e) This section shall become operative on January 1, 2016.

21 SEC. 9. Section 1569.626 of the Health and Safety Code is
22 amended to read:

23 1569.626. All residential care facilities for the elderly that
24 advertise or promote special care, special programming, or a special
25 environment for persons with dementia, in addition to complying
26 with the training requirements described in Section 1569.625, shall
27 meet the following training requirements for all direct care staff:

28 (a) Six hours of resident care orientation within the first four
29 weeks of employment. All six hours shall be devoted to the care
30 of persons with dementia. The facility may utilize various methods
31 of instruction including, but not limited to, preceptorship,
32 mentoring, and other forms of observation and demonstration. The
33 orientation time shall be exclusive of any administrative instruction.

34 (b) Eight hours of in-service training per year on the subject of
35 serving residents with dementia. This training shall be developed
36 in consultation with individuals or organizations with specific
37 expertise in dementia care or by an outside source with expertise
38 in dementia care. In formulating and providing this training,
39 reference may be made to written materials and literature on
40 dementia and the care and treatment of persons with dementia.

1 This training requirement may be satisfied in one day or over a
2 period of time. This training requirement may be provided at the
3 facility or offsite and may include a combination of observation
4 and practical application.

5 *(c) This section shall remain in effect only until January 1, 2016,*
6 *and as of that date is repealed, unless a later enacted statute, that*
7 *is enacted before January 1, 2016, deletes or extends that date.*

8 SEC. 10. Section 1569.626 is added to the Health and Safety
9 Code, to read:

10 1569.626. All residential care facilities for the elderly that
11 advertise or promote special care, special programming, or a
12 special environment for persons with dementia, in addition to
13 complying with the training requirements described in Section
14 1569.625, shall meet the following training requirements for all
15 direct care staff:

16 (a) Fifteen hours of resident care orientation prior to providing
17 direct care to residents. All 15 hours shall be devoted to the care
18 of persons with dementia. The facility may utilize various methods
19 of instruction including, but not limited to, preceptorship,
20 mentoring, and other forms of observation and demonstration.
21 The orientation time shall be exclusive of any administrative
22 instruction.

23 (b) Twelve hours of in-service training per year on the subject
24 of providing care and supervision to residents with dementia. This
25 training shall be developed in consultation with individuals or
26 organizations with specific expertise in dementia care or by an
27 outside source with expertise in dementia care. In formulating and
28 providing this training, reference may be made to written materials
29 and literature on dementia and the care and treatment of persons
30 with dementia. This training requirement may be provided at the
31 facility or offsite and may include a combination of observation
32 and practical application.

33 (c) This section shall become operative on January 1, 2016.

34 SEC. 11. Section 1569.69 of the Health and Safety Code is
35 amended to read:

36 1569.69. (a) Each residential care facility for the elderly
37 licensed under this chapter shall ensure that each employee of the
38 facility who assists residents with the self-administration of
39 medications meets the following training requirements:

1 (1) In facilities licensed to provide care for 16 or more persons,
2 the employee shall complete 16 hours of initial training. This
3 training shall consist of eight hours of hands-on shadowing training,
4 which shall be completed prior to assisting with the
5 self-administration of medications, and eight hours of other training
6 or instruction, as described in subdivision (f), which shall be
7 completed within the first two weeks of employment.

8 (2) In facilities licensed to provide care for 15 or fewer persons,
9 the employee shall complete six hours of initial training. This
10 training shall consist of two hours of hands-on shadowing training,
11 which shall be completed prior to assisting with the
12 self-administration of medications, and four hours of other training
13 or instruction, as described in subdivision (f), which shall be
14 completed within the first two weeks of employment.

15 (3) An employee shall be required to complete the training
16 requirements for hands-on shadowing training described in this
17 subdivision prior to assisting any resident in the self-administration
18 of medications. The training and instruction described in this
19 subdivision shall be completed, in their entirety, within the first
20 two weeks of employment.

21 (4) The training shall cover all of the following areas:

22 (A) The role, responsibilities, and limitations of staff who assist
23 residents with the self-administration of medication, including
24 tasks limited to licensed medical professionals.

25 (B) An explanation of the terminology specific to medication
26 assistance.

27 (C) An explanation of the different types of medication orders:
28 prescription, over-the-counter, controlled, and other medications.

29 (D) An explanation of the basic rules and precautions of
30 medication assistance.

31 (E) Information on medication forms and routes for medication
32 taken by residents.

33 (F) A description of procedures for providing assistance with
34 the self-administration of medications in and out of the facility,
35 and information on the medication documentation system used in
36 the facility.

37 (G) An explanation of guidelines for the proper storage, security,
38 and documentation of centrally stored medications.

39 (H) A description of the processes used for medication ordering,
40 refills, and the receipt of medications from the pharmacy.

1 (I) An explanation of medication side effects, adverse reactions,
2 and errors.

3 (5) To complete the training requirements set forth in this
4 subdivision, each employee shall pass an examination that tests
5 the employee's comprehension of, and competency in, the subjects
6 listed in paragraph (4).

7 (6) Residential care facilities for the elderly shall encourage
8 pharmacists and licensed medical professionals to use plain English
9 when preparing labels on medications supplied to residents. As
10 used in this section, "plain English" means that no abbreviations,
11 symbols, or Latin medical terms shall be used in the instructions
12 for the self-administration of medication.

13 (7) The training requirements of this section are not intended
14 to replace or supplant those required of all staff members who
15 assist residents with personal activities of daily living as set forth
16 in Section 1569.625.

17 (8) The training requirements of this section shall be repeated
18 if either of the following occurs:

19 (A) An employee returns to work for the same licensee after a
20 break of service of more than 180 consecutive calendar days.

21 (B) An employee goes to work for another licensee in a facility
22 in which he or she assists residents with the self-administration of
23 medication.

24 (b) Each employee who received training and passed the
25 examination required in paragraph (5) of subdivision (a), and who
26 continues to assist with the self-administration of medicines, shall
27 also complete four hours of in-service training on
28 medication-related issues in each succeeding 12-month period.

29 (c) The requirements set forth in subdivisions (a) and (b) do not
30 apply to persons who are licensed medical professionals.

31 (d) Each residential care facility for the elderly that provides
32 employee training under this section shall use the training material
33 and the accompanying examination that are developed by, or in
34 consultation with, a licensed nurse, pharmacist, or physician. The
35 licensed residential care facility for the elderly shall maintain the
36 following documentation for each medical consultant used to
37 develop the training:

38 (1) The name, address, and telephone number of the consultant.

39 (2) The date when consultation was provided.

1 (3) The consultant's organization affiliation, if any, and any
2 educational and professional qualifications specific to medication
3 management.

4 (4) The training topics for which consultation was provided.

5 (e) Each person who provides employee training under this
6 section shall meet the following education and experience
7 requirements:

8 (1) A minimum of five hours of initial, or certified continuing,
9 education or three semester units, or the equivalent, from an
10 accredited educational institution, on topics relevant to medication
11 management.

12 (2) The person shall meet any of the following practical
13 experience or licensure requirements:

14 (A) Two years of full-time experience, within the last four years,
15 as a consultant with expertise in medication management in areas
16 covered by the training described in subdivision (a).

17 (B) Two years of full-time experience, or the equivalent, within
18 the last four years, as an administrator for a residential care facility
19 for the elderly, during which time the individual has acted in
20 substantial compliance with applicable regulations.

21 (C) Two years of full-time experience, or the equivalent, within
22 the last four years, as a direct care provider assisting with the
23 self-administration of medications for a residential care facility
24 for the elderly, during which time the individual has acted in
25 substantial compliance with applicable regulations.

26 (D) Possession of a license as a medical professional.

27 (3) The licensed residential care facility for the elderly shall
28 maintain the following documentation on each person who provides
29 employee training under this section:

30 (A) The person's name, address, and telephone number.

31 (B) Information on the topics or subject matter covered in the
32 training.

33 (C) The time, dates, and hours of training provided.

34 (f) Other training or instruction, as required in paragraphs (1)
35 and (2) of subdivision (a), may be provided offsite, and may use
36 various methods of instruction, including, but not limited to, all
37 of the following:

38 (1) Lectures by presenters who are knowledgeable about
39 medication management.

1 (2) Video recorded instruction, interactive material, online
2 training, and books.

3 (3) Other written or visual materials approved by organizations
4 or individuals with expertise in medication management.

5 (g) Residential care facilities for the elderly licensed to provide
6 care for 16 or more persons shall maintain documentation that
7 demonstrates that a consultant pharmacist or nurse has reviewed
8 the facility's medication management program and procedures at
9 least twice a year.

10 (h) Nothing in this section authorizes unlicensed personnel to
11 directly administer medications.

12 (i) *This section shall remain in effect only until January 1, 2016,*
13 *and as of that date is repealed, unless a later enacted statute, that*
14 *is enacted before January 1, 2016, deletes or extends that date.*

15 *SEC. 12. Section 1569.69 is added to the Health and Safety*
16 *Code, to read:*

17 *1569.69. (a) Each residential care facility for the elderly*
18 *licensed under this chapter shall ensure that each employee of the*
19 *facility who assists residents with the self-administration of*
20 *medications meets all of the following training requirements:*

21 *(1) In facilities licensed to provide care for 16 or more persons,*
22 *the employee shall complete 32 hours of initial training. This*
23 *training shall consist of 12 hours of hands-on shadowing training,*
24 *which shall be completed prior to assisting with the*
25 *self-administration of medications, and 20 hours of other training*
26 *or instruction, as described in subdivision (f), which shall be*
27 *completed within the first four weeks of employment.*

28 *(2) In facilities licensed to provide care for 15 or fewer persons,*
29 *the employee shall complete 16 hours of initial training. This*
30 *training shall consist of eight hours of hands-on shadowing*
31 *training, which shall be completed prior to assisting with the*
32 *self-administration of medications, and eight hours of other*
33 *training or instruction, as described in subdivision (f), which shall*
34 *be completed within the first two weeks of employment.*

35 *(3) An employee shall be required to complete the training*
36 *requirements for hands-on shadowing training described in this*
37 *subdivision prior to assisting any resident in the self-administration*
38 *of medications. The training and instruction described in this*
39 *subdivision shall be completed, in their entirety, within the first*
40 *two weeks of employment.*

1 (4) *The training shall cover all of the following areas:*

2 (A) *The role, responsibilities, and limitations of staff who assist*
3 *residents with the self-administration of medication, including*
4 *tasks limited to licensed medical professionals.*

5 (B) *An explanation of the terminology specific to medication*
6 *assistance.*

7 (C) *An explanation of the different types of medication orders:*
8 *prescription, over-the-counter, controlled, and other medications.*

9 (D) *An explanation of the basic rules and precautions of*
10 *medication assistance.*

11 (E) *Information on medication forms and routes for medication*
12 *taken by residents.*

13 (F) *A description of procedures for providing assistance with*
14 *the self-administration of medications in and out of the facility,*
15 *and information on the medication documentation system used in*
16 *the facility.*

17 (G) *An explanation of guidelines for the proper storage, security,*
18 *and documentation of centrally stored medications.*

19 (H) *A description of the processes used for medication ordering,*
20 *refills, and the receipt of medications from the pharmacy.*

21 (I) *An explanation of medication side effects, adverse reactions,*
22 *errors, the adverse effects of psychotropic drugs for use in*
23 *controlling the behavior of persons with dementia, and the*
24 *increased risk of death when elderly residents with dementia are*
25 *given antipsychotic medications.*

26 (5) *To complete the training requirements set forth in this*
27 *subdivision, each employee shall pass an examination that tests*
28 *the employee's comprehension of, and competency in, the subjects*
29 *listed in paragraph (4).*

30 (6) *Residential care facilities for the elderly shall encourage*
31 *pharmacists and licensed medical professionals to use plain*
32 *English when preparing labels on medications supplied to*
33 *residents. As used in this section, "plain English" means that no*
34 *abbreviations, symbols, or Latin medical terms shall be used in*
35 *the instructions for the self-administration of medication.*

36 (7) *The training requirements of this section are not intended*
37 *to replace or supplant those required of all staff members who*
38 *assist residents with personal activities of daily living as set forth*
39 *in Sections 1569.625 and 1569.696.*

1 (8) *The training requirements of this section shall be repeated*
2 *if either of the following occur:*

3 (A) *An employee returns to work for the same licensee after a*
4 *break of service of more than 180 consecutive calendar days.*

5 (B) *An employee goes to work for another licensee in a facility*
6 *in which he or she assists residents with the self-administration*
7 *of medication.*

8 (b) *Each employee who received training and passed the*
9 *examination required in paragraph (5) of subdivision (a), and who*
10 *continues to assist with the self-administration of medicines, shall*
11 *also complete eight hours of in-service training on*
12 *medication-related issues in each succeeding 12-month period.*

13 (c) *The requirements set forth in subdivisions (a) and (b) do not*
14 *apply to persons who are licensed medical professionals.*

15 (d) *Each residential care facility for the elderly that provides*
16 *employee training under this section shall use the training material*
17 *and the accompanying examination that are developed by, or in*
18 *consultation with, a licensed nurse, pharmacist, or physician. The*
19 *licensed residential care facility for the elderly shall maintain the*
20 *following documentation for each medical consultant used to*
21 *develop the training:*

22 (1) *The name, address, and telephone number of the consultant.*

23 (2) *The date when consultation was provided.*

24 (3) *The consultant's organization affiliation, if any, and any*
25 *educational and professional qualifications specific to medication*
26 *management.*

27 (4) *The training topics for which consultation was provided.*

28 (e) *Each person who provides employee training under this*
29 *section shall meet the following education and experience*
30 *requirements:*

31 (1) *A minimum of five hours of initial, or certified continuing,*
32 *education or three semester units, or the equivalent, from an*
33 *accredited educational institution, on topics relevant to medication*
34 *management.*

35 (2) *The person shall meet any of the following practical*
36 *experience or licensure requirements:*

37 (A) *Two years of full-time experience, within the last four years,*
38 *as a consultant with expertise in medication management in areas*
39 *covered by the training described in subdivision (a).*

1 (B) Two years of full-time experience, or the equivalent, within
2 the last four years, as an administrator for a residential care
3 facility for the elderly, during which time the individual has acted
4 in substantial compliance with applicable regulations.

5 (C) Two years of full-time experience, or the equivalent, within
6 the last four years, as a direct care provider assisting with the
7 self-administration of medications for a residential care facility
8 for the elderly, during which time the individual has acted in
9 substantial compliance with applicable regulations.

10 (D) Possession of a license as a medical professional.

11 (3) The licensed residential care facility for the elderly shall
12 maintain the following documentation on each person who provides
13 employee training under this section:

14 (A) The person's name, address, and telephone number.

15 (B) Information on the topics or subject matter covered in the
16 training.

17 (C) The times, dates, and hours of training provided.

18 (f) Other training or instruction, as required in paragraphs (1)
19 and (2) of subdivision (a), may be provided offsite, and may use
20 various methods of instruction, including, but not limited to, all
21 of the following:

22 (1) Lectures by presenters who are knowledgeable about
23 medication management.

24 (2) Video recorded instruction, interactive material, online
25 training, and books.

26 (3) Other written or visual materials approved by organizations
27 or individuals with expertise in medication management.

28 (g) Residential care facilities for the elderly licensed to provide
29 care for 16 or more persons shall maintain documentation that
30 demonstrates that a consultant pharmacist or nurse has reviewed
31 the facility's medication management program and procedures at
32 least twice a year.

33 (h) Nothing in this section authorizes unlicensed personnel to
34 directly administer medications.

35 (i) This section shall become operative on January 1, 2016.

36 ~~SEC. 8.~~

37 SEC. 13. Section 1569.696 is added to the Health and Safety
38 Code, to read:

39 1569.696. (a) All residential care facilities for the elderly that
40 serve residents with postural supports, as described in Section

1 87608 of Title 22 of the California Code of Regulations, or
2 restricted health conditions or health services, as described in
3 Section 87612 of Title 22 of the California Code of Regulations,
4 or who receive hospice services, as described in Section 87633 of
5 Title 22 of the California Code of Regulations, in addition to
6 complying with the training requirements in Section 1569.625,
7 shall meet the following training requirements for all direct care
8 staff:

9 (1) Fifteen hours of training on the care, supervision, and special
10 needs of those residents, prior to providing direct care to residents.
11 The facility may utilize various methods of instruction, including,
12 but not limited to, preceptorship, mentoring, and other forms of
13 observation and demonstration. The orientation time shall be
14 exclusive of any administrative instruction.

15 (2) Twelve hours thereafter of in-service training per year on
16 the subject of serving those residents.

17 (b) This training shall be developed in consultation with
18 individuals or organizations with specific expertise in the care of
19 those residents described in subdivision (a). In formulating and
20 providing this training, reference may be made to written materials
21 and literature. This training requirement may be provided at the
22 facility or offsite and may include a combination of observation
23 and practical application.

24 (c) *This section shall become operative on January 1, 2016.*

25 ~~SEC. 9.~~

26 *SEC. 14.* No reimbursement is required by this act pursuant to
27 Section 6 of Article XIII B of the California Constitution because
28 the only costs that may be incurred by a local agency or school
29 district will be incurred because this act creates a new crime or
30 infraction, eliminates a crime or infraction, or changes the penalty
31 for a crime or infraction, within the meaning of Section 17556 of
32 the Government Code, or changes the definition of a crime within
33 the meaning of Section 6 of Article XIII B of the California
34 Constitution.